


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 22 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **637288** (2)  
1. Corporation Name  
**LLOYD HOWARD INC.**

Principal Place of Business <b>2933 EDENDERRY DR SARASOTA FL TALLAHASSEE FL 34241 US</b>	Mailing Address <b>4388 BRANDYWINE DR SARASOTA FL 34241 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 4636 RAMSGATE DR.</b>		2a. Mailing Address <b>26 4636 RAMSGATE DR.</b>		3. Date Incorporated or Qualified <b>09/24/1979</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number <b>59-1967898</b>	
22 City & State <b>23 TALLAHASSEE, FL.</b>		27 City & State <b>28 TALLAHASSEE, FL.</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24 Zip <b>32308</b> Country <b>US</b>		29 Zip <b>32308</b> Country <b>US</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
25 LEON		30 LEON		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>HOWARD, LLOYD 318 ROYAL PALM WAY. BOCA RATON FL 33432</b>				10. Name and Address of New Registered Agent			
				81 Name <b>HOWARD, LLOYD</b>			
				82 Street Address (P.O. Box Number is Not Acceptable) <b>4636 RAMSGATE DR.</b>			
				83			
				84 City <b>TALLAHASSEE FL</b> 85 Zip Code <b>32308</b>			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Lloyd Howard (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	ST	<input type="checkbox"/> DELETE		1.1 TITLE	ST	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOWARD, LLOYD			1.2 NAME	HOWARD, LLOYD		
STREET ADDRESS	318 ROYAL PALM WAY.			1.3 STREET ADDRESS	4636 RAMSGATE DR.		
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY-ST-ZIP	TALLAHASSEE, FL, 32308		
TITLE	P	<input type="checkbox"/> DELETE		2.1 TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOWARD, FLORITA			2.2 NAME	HOWARD, FLORITA		
STREET ADDRESS	818 ROYAL PALM WAY			2.3 STREET ADDRESS	4636 RAMSGATE DR.		
CITY-ST-ZIP	BOCA RATON FL			2.4 CITY-ST-ZIP	TALLAHASSEE, FL, 32308		
TITLE	V	<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOWARD, DAVID			3.2 NAME			
STREET ADDRESS	CALLE 34 NORTE			3.3 STREET ADDRESS			
CITY-ST-ZIP	CALI, COLUMBIA, S.A.			3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lloyd Howard Lloyd Howard 4-20-98 850 668-7738

CR2E034 (10/97)